附件2

住房公积金缴存基数构成明细表（事业单位）

填报单位：（盖章） 单位：元

|  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| 序号 | 姓名 | 身份证号码 | 岗位工资 | 薪级工资 | 绩效工资 | 保留工资 | 13个月工资 | 奖金 | 其他 | 工资合计 | 实际缴存基数 |
|  |  |  |  |  |  |  |  |  |  |  |  |
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单位负责人： 填报人：